

Option B+ Pilot Underway

The Option B+ evaluation has reached six months of implementation in Bamenda and Kumba health districts. The pilot program, supported by Cameroon Baptist Convention (CBC), aims to initiate 600 mother-baby pairs attending maternal and child health services, including ANC, L&D, and IWC. Mother-baby pairs will be followed through 18 months post-partum when the final HIV diagnosis of the infant can be determined.

Lifelong treatment has been received well with a 98% acceptance rate among ART-naïve cases and women on AZT prophylaxis under Option A. As of March 2014, 453 (76% of target) HIV-positive pregnant and breastfeeding women have been enrolled into the pilot. It is anticipated the enrollment target will be reached by mid-June 2014. Preliminary analyses show 4% mother-to-child transmission rate for infants greater than 6 weeks.

Close monitoring of the pilot evaluation has identified lessons learned to inform the Ministry of Health of further scale up. Data collection remains to be a challenge; however, facilitative supervision and engagement of health care providers have reduced these gaps. ART initiation time has shortened though there is need to ensure robust reporting systems are in place between MNCH and care and treatment programs for effective patient monitoring. Peer Educators have played a key role in maternal and infant retention through active follow up in the community. The Bikers for Health program has facilitated the movement of laboratory samples, results, and other supplies.

CBC plans to implement Quality Improvement activities in the B+ pilot sites over the next few months to further strengthen quality of care. We wish them continued success and look forward to hearing more as they progress.



Photo: E M Khan

Option B+ training of nurses on Adherence Management in Kumba by trainer Njunda Delphine, Coordinator of HIV C&T Center in Baptist Hospital Mutengene.

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Happy International Women's Day!

CDC staff walk on Women's Day Parade, Mar 8, 2014, to support this year's theme of "challenges and achievements in the implementation of the Millennium Development Goals for Women and girls."

Left to Right: Sidouanne Signing, Esther Lyonga, Judith Shang, Adiba Hassan, Laura Dimite, Agathe Mbia.



Photo: A Wilson

Leadership in Action

In the Feb 2014 Lab Culture issue, Cameroon’s Minister of Health, Andre Mama Fouda, pledged total support and commitment to transform the landscape of labs in Cameroon. His achievements since 2007 has marked foot-steps towards this transformation. To list a few, his efforts have contributed to creation of a sub-directorate for laboratory and blood safety, designation of a national public health laboratory and the creation of a permanent secretariat for blood safety. An on-going laboratory facility survey will contribute to drafting of a national strategic plan for laboratories. His background in engineering is noticeable with the emphasis and support shown towards quality clinical diagnosis, highlighting an essential need for increasing laboratory accreditation.



Participants at NBTP Meeting. Front row (L to R): Dr. Noah Apollonie, Permanent Secretary of the NBTP; Prof. Magloire Biwolé Sida, Inspector General MOH; Dr. Ondoa Mekongo, Inspector, MOH .

Advocacy Meeting: Cameroon National Blood Safety Program

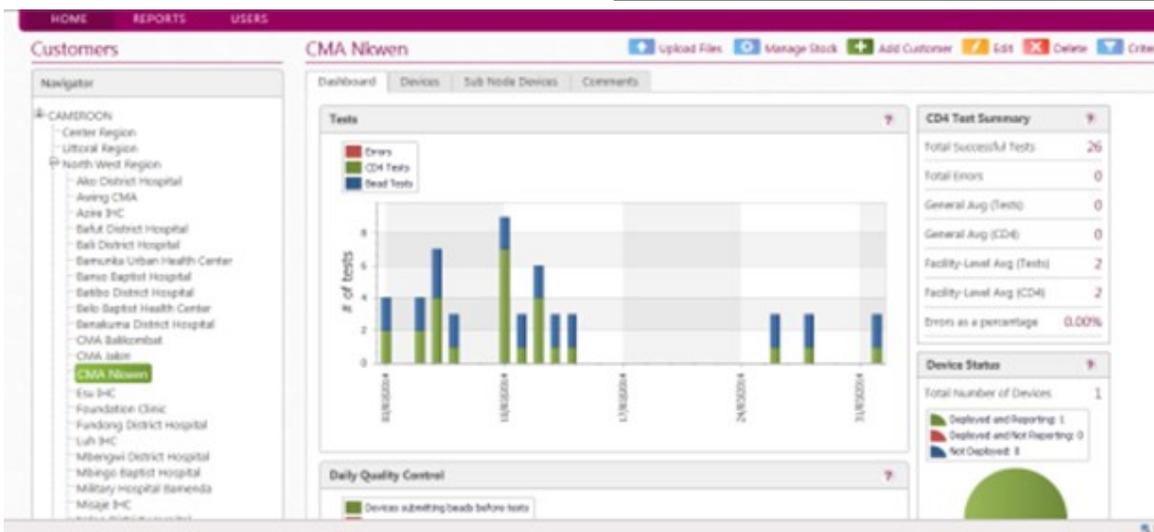
The National Blood Transfusion Program held a one day meeting in Yaounde on Feb 5, 2014, bringing together various stakeholders and potential funders to highlight roles to support the blood safety agenda in Cameroon. The meeting created awareness, increased advocacy efforts, and drew public attention for the blood safety program. The structure and organogram of the national blood transfusion program were presented and challenges discussed.



Minister of Public Health, André Mama Fouda, addressing opening of Advocacy Meeting.

Implementation of Connectivity Solutions

A point-of-care decentralization approach has led to dramatic impact on universal access to CD4 testing, however, monitoring quality and managing data yet needs to be resolved. The Ministry of Public Health in collaboration with Cameroon Baptist Convention Health Board (CBCHB), Clinton Health Access Initiative (CHAI) and the Centers for Disease Control and Prevention (CDC) designed an implementation plan to scale up connectivity solutions, a monitoring tool for quality diagnostic services in 56 sites. A six month pilot study was implemented in the North West and South West regions to: 1) Monitor access to CD4 testing, 2) Examine commodity consumption, 3) Conduct quality control, 4) Assess reliability of results, 5) Monitor device functionality, and 6) Observe end-user performance.



Central database hosted by Alere called "Data Point" via mobile network.

National Blood Bank Staff Coordination Meeting in Mbalmayo

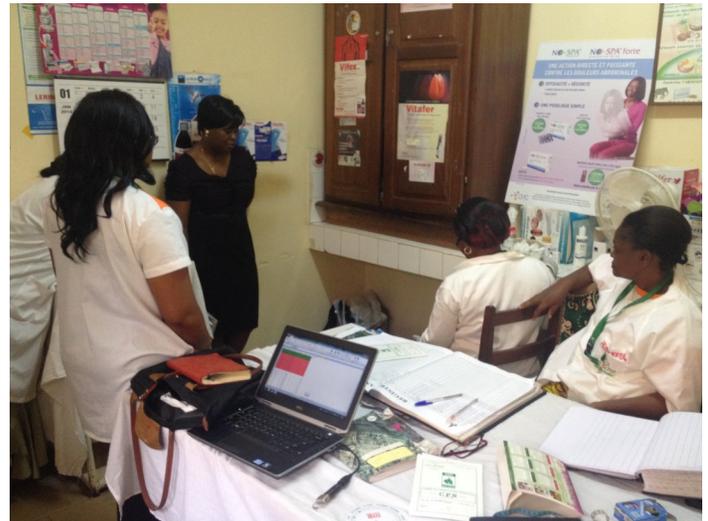
The National Blood Transfusion Program held a two-day meeting in Mbalmayo on March 12 for blood bank staff to review performance of various blood banks and challenges faced. Each blood center presented their achievements and failures during the past 6 – 12 months, work plans and time frames. Reagents needed for blood bank performance was evaluated as well as strategies for improving performance.

Health Laboratory Practitioners Trained on Laboratory Assessment Tool

Limited resources, inadequate equipment, low supplies and poor infrastructure in health facilities has been a continuous challenge in PMTCT service delivery. The Department of Pharmacy, Medicines and Laboratories in the Ministry of Public Health in collaboration with Global Health Systems Solution (GHSS) and the Centers for Disease Control and Prevention (CDC) organized a training workshop for laboratory staff on use of Assessment Tool for Laboratory Services and Supply Chain (ATLAS) for laboratory services. Data collected from this assessment will serve as a baseline data for laboratory policy and strategic planning.

In preparation for this activity, 30 assessors were selected from ten health facilities in ten regions including ten staff from Ministry of Health to serve as supervisors. The process included a 3-day training of assessors to field test the tool in five hospital laboratories in the Centre region. As a result, the tool was further improved with modified questions, gaps identified and timeframe for execution.

The workshop permitted health practitioners to contribute significantly to the development of the tool. The success of this plan relies on the commitment of all health laboratory practitioners, government stakeholders, non-governmental organizations, and users of laboratory services in supporting health care delivery package and HIV/AIDS service interventions.



CDC Quality Assurance staff, Laura Dimite, observing HD Cité Verte ANC staff during HIV counseling and testing session.

M&E Tools and Training Underway

As rollout of national registers continue, ICAP continues to support the Government of Cameroon (GoC) in printing and distributing PMTCT/MNCH M&E tools with 8,350 registers printed for Center, East and South regions. To date, 622 facility staff received training on use of the PMTCT/MNCH tools while another 50 staff from center regional level were trained on electronic data aggregation. In addition, 2,000 pregnancy follow-up cards were printed for piloting in Center and South-West regions. A workshop was also organized by NACC on strengthening health information systems.

Bottom: Cameroon delegation at QI training in Tanzania with Lauren Eposi Motanga (MoH), Terence Tumenta (MoH), Colince Keleko (CDC) and Jennifer Lim (CDC).



Left: Collaboration between key stakeholders remain key to transforming the landscape of laboratories in Cameroon. On May 6, 2014, Centre Pasteur Cameroon, joined 12 other laboratories to implement the SLIPTA process in Cameroon leading to accreditation.

From the Director



As we round up FY 2014 Country Operation Plan (COP) season this quarter, we share a global responsibility for successful implementation of HIV/AIDS program in Cameroon, guided by scientific advances to reach the tipping point in the fight against HIV/AIDS. In an urgency to reduce the number of new infections, we continue to work with our biggest supporter, the Government of Cameroon and implementing partners to distribute tools, assistance and guidance for improved access and quality of HIV/AIDS services. Our first two-year planning cycle FY 2014 ended following various efforts on portfolio reviews, partner performance reviews, partner consultations, analysis and planning. I would like to extend my gratitude to the PEPFAR Cameroon team for their extraordinary performance during this period working above and beyond to lay the map for the upcoming years.

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We thank our partners and many others for their collaboration and continuous strive in supporting PEPFAR-CDC.

